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Companies   Continuation sheet(s) if necessary   Continuation sheet(s) if necessary	APMENT: Complete   Partial   Use continuation sheet(s) if necessary hipped from to Weight Government B/L No.  Correct for and just and that payment has not been received.  (Sign original only)  Date 2-26-57  Payee  Amount verified: correct for Payee must NOT use this space)  Title  Contract No. A101.  Date Reg. No.  Date  Contract No. A101.  Date Contribute in me, I certify that this account is correct and proper for payment.  † Approved for \$  ORIGINAL ONLY  Contract No.  Contract Contract No.  Contract No.  Contract Contract Samples and Amount Verified to this oribinate and No.  Contract No.  Co	oucher prep	oared at	(GI	ve place and date)				ENCL	#10	~~
(Payee)  (Address) (City) (State)  (Address) (City) (State)  (Control description of Date of D	O							100 miles	SAPC / Z	3683	
(Payes)  (Address)  (City) (State)  ARTICLES OR SERVICES  ARTICLES OF SERVICES  (Enter description tien number of contract or Federal supply or Service)  (Enter description tien number of contract or Federal supply of Service)  (Cost Per Dollars Cost Per Dollars Cost Per Discount Terms  COSTS FOIAD3A  FOIAD3A  FOIAD3B  COmplete   Discount Terms  COSTS FOIAD3A  FOIAD3B	AMMENT: Complete   Partial   Use continuation sheet(s) if necessary  APTICLES OR SERVICES Costs   FOIAb3a   QUANTITY   Cost   Per   Dollars  AMMENT: Complete   Partial   Use continuation sheet(s) if necessary  APMENT: Complete   Partial   Government B/L No.   Total   Append from to Weight Government B/L No.   Total   Append from to Weight Government B/L No.   Total   Append from to Weight Government B/L No.   Total   Append from to Total   Cost   Per   Append from to Total   Cost   Per   Append from to Total   Cost   Per   Append from to Weight Government B/L No.   Total   Append from to Total   Cost   Per   Append for to Weight Government B/L No.   Total   Append for to Weight Governmen			v				1	COPY /	OF Z	
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ARTICLES OR SERVICES Or and Date of Delivery or Service    Center description   Center descri	ARTICLES OR SERVICES			(6	Tito)	(State)		_ L			
Schedule, and other information deemet increases.  Cost Per Dollars ( Discount Terms  Costs FOIAb3a  FOIAb3b  Costs FOIAb3a  FOIAb3b  Use continuation sheet(s) if necessary  Final Use continuation sheet(s) if necessary  Final O Weight Government B/L No.  Total imped from to Weight Government B/L No.  (Sign original only)  Costs FOIAb3a  Total O Per Dollars ( Differences Original only)  Differences On this space)  Differences Original only  Amount verified; correct for (Signature or initials)  Amount verified; correct for (Signature or initials)  Title Ontract No. Alol Date Req. No. Date Invoice Rec'd.  ORIGINAL ONLY  Date ONLY  Title Only  Title Only  ORIGINAL ONLY  Date The reverse of This form must be executed when furchases are made or services secured without written agreement in any form	Costs FOIAb3a  Costs FOIAb3a  FOIAb3b  Complete   Foiation   Use continuation sheet(s) if necessary  Disposed from to Weight Government B/L No.  Correct and just and that payment has not been received.  (Sign original only)  Date Req. No.  Date Invoice Rec'd.  Cost Per Dollars  Per Dollars  Foiation   Total   Foiation   Foiation			TOO I	EC OD SERVICES			UNIT	PRICE	AMOUN	٧T
FOIAb3b    Complete   Partial   Use continuation sheet(s) if necessary   Total	FOIAb3b    Complete   Partial   Use continuation sheet(s) if necessary   Total		Date of Delivery or Service	schedule, and other i	nformation deemed necessar	ry)	QUANTITY	Cost	Per	Dollars	Cto
YMENT:   Complete   Partial   Use continuation sheet(s) if necessary   Total   Use continuation sheet(s) if necessary   Total   Prinal   Use continuation sheet(s) if necessary   Total   Prinal   Use continuation sheet(s) if necessary   Total   Prinal   (Payee must NOT use this space)   Differences   (Payee must NOT use this space)   Differences   (Payee must NOT use this space)   Differences   (Sign original only)   Prinal   (Signature or initials)   Amount verified; correct for (Signature or initials)   Prinal   (Signature or initials)	VMENT:   Complete   Partial   Use continuation sheet(s) if necessary   Total			Costs	FOIA	Ab3a					
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(Sign original only)    Amount verified; correct for Signature or initials)   Amount verified; correct for Signature or initials   Signature or initials   Signature or initials   Amount verified; correct for Signature or initials   Signature or init	(Sign original only)  Pate						•				
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Approved for \$	Approved for \$				arrect and proper for paymen	t.					
SIGN ORIGINAL Title ONLY  Date THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM	SIGN ORIGINAL Title				†						
ONLY  Date  THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM	ONLY  Date	Approved for	<b>3</b>		CICN						
THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM	P'A).	By			ONLY					*	
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## Approved For Release 2000/04/11: CIA-RDP64-00360R000500030040-0

## METHOD OF OR ABSENCE OF ADVERTISING

### METHOD OF ADVERTISING

1.	Advertising in newspapers Yes \( \square\) No \( \square\).
2.	(a) Advertising by circular letters sent to dealers.
	(b) And by notices posted in public places Yes \( \sqrt{No} \sqrt{\sqrt{No}} \sqrt{No
	(b) And by notices posted in public places ————————————————————————————————————
	ABSENCE OF ADVERTISING
3.	Without advertising, under an exigency of the service which existed prior to the order and would not admit of the delay incident to advertising.
4.	advertising.  Without advertising in accordance with
5.	Without advertising, it being impracticable to secure competition because of
	(Here state in detail the nature of the exigency or circumstances under which the securing of competition was impracticable under 3 and 4)
	Note.—The above form "Method of or Absence of Advertising" is to be used when purchases are made or services secured under roper authority without written agreement in any form. In case of a written agreement (formal contract, proposal, and acceptance, or ess formal agreement) Standard Form No. 1036—Revised should be used for abstracting the method of or absence of advertising and ward of contract. (See General Regulations No. 51, as amended.)

☆ U.S. GOVERNMENT PRINTING OFFICE: 1954-O-296709

# Standard Form No. 1035a—Revised Form prescribed by Comptrol provided For Release 2010to V trucher 6564 Pose 617, 1950 (Gen. Reg. No. 51, Supp. No. 11) Services Other Than Personal Services Other Than Personal

CONTINUATION SHEET

**MEMORANDUM** 

No. and Date	Date of Delivery	ARTICLES OR SERVICES	077.137	UNIT	PRICE	AMOUN	YT
of Order	or Service	(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	Cost	Per	Dollars	
		Contract AlOl - System IV					
		Direct Costs Properly Chargeable to Contract AlOl for the period 2/4/57 thru 2/10/57			FO	Ab3a	
		Labor Week Ending February 10, 1957					
DIAb3a IAb3a		Overhead computed for Computers Systems Division at interim rate of					
		Other Costs - sheet no. 2					
		Total Labor, Overhead and Other Costs					
IAb3a		G & A expense computed at interim rate of					
		Total Costs	·				

# Standard Form No. 1035a—Revised Form passion of Ved For Release 2160 W461chea-Rop Aunochesses 500d30040-0 September 7, 1950 (Gen. Reg. No. 51, Supp. No. 11) Services Other Than Personal

CONTINUATION SHEET

**MEMORANDUM** 

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No. and Date of Order	Date of Delivery	ARTICLES OR SERVICES  (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	UNIT E		AMOUNT
of Order	or Service	and other information deemed necessary)	<u> </u>	Cost	Per	Dollars Cts.
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